

Thank you for your interest in the Congressional Art Competition. In order to better serve you, this form will allow you to go to a printable page that should be mailed to the office for processing.

Contact Information

* indicates required information

First Name *:

Last Name: *:

Parents/Guardians *:

Street Address *:

City, State Zip Code *: ,

Telephone Number *:

Email *:

Entry Title*:

Education Information

Name of High School*:

Grade *:

Art Teacher *:

Phone *:

Medium-Please Select One

Painting Drawing Print

Mixed Media Computer Graphic Photography

Print This Form